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PTO/SB/81 (11-96)

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APPLICATION**

Application Number	09/242,449
Filing Date	02/16/99
First Named Inventor	Johanna Bergmann.
Group Art Unit	1643
Examiner Name	Unassigned
Attorney Docket Number	424022000200

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Susan K. Lehnhardt	33,943

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Country	United States of America				
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I am the:

☒ Applicant.

☐ Assignee of record of the entire interest  
Certificate under 37 CFR 3.73(b) is enclosed

**SIGNATURE of Applicant or Assignee of Record**

Name	Dr. Johanna BERGMANN
Signature	<i>Johanna Bergmann</i>
Date	15/07/1999

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Bergmann et al.

U.S. Serial No.: 09/242,449

Filing Date: February 16, 1999

For : AGENTS FOR PRE-SYMPTOMATIC DETECTION AND  
THERAPEUTIC TARGETING OF ALZHEIMER'S DISEASE AND  
~~DOWN SYNDROME IN HUMANS~~

Examiner: B. Tedeschi

745 Fifth Avenue  
New York, NY 10151

**FACSIMILE**

I hereby certify that this paper is being facsimile transmitted  
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Amy Leahy

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Signature

August 30, 2002

\_\_\_\_\_  
Date of Signature

**ASSOCIATE POWER OF ATTORNEY AND CHANGE OF ADDRESS**

Commissioner for Patents  
Washington, D.C. 20231

Sir:

The undersigned, Susan K. Lehnhardt, Registration No. 33,943, the attorney of record in this application, appoints William F. Lawrence, Registration No. 28,029 and Amy Leahy, Registration No. 47,739, associate attorney with full power to prosecute this application, make alterations and amendments, and to transact all business in the U.S. Patent and Trademark Office, including to receive the Letters Patent, appoint others as associate attorney, and terminate any powers of attorney previously granted.

Kindly address all correspondence and communications to:

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Respectfully submitted,

Attorney for Applicant(s)

By Susan Lehnhardt  
Susan K. Lehnhardt  
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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/EP97/04599	08/22/96	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number  OR ☐ Registered practitioner(s) name/registration number listed below:

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

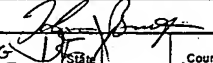
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Name	DR. JOHANNA BERGMANN		
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Telephone	49 40 8666 2948	Fax	49 40 8666 2949

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle if any)	JOHANNA	Family Name or Surname	BERGMANN
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Inventor's Signature		Date	02/10/99
Residence: City	HAMBURG	Country	GERMANY

Post Office Address: MOERIKESTR. 22

City	HAMBURG	State		ZIP	22587	Country	GERMANY
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☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
ENRIQUE PREDDIE		PREDDIE			
Inventor's Signature	[Signature]			Date	
Residence: City	MONTREAL	State	QUEBEC	Country	CANADA
Post Office Address					
Post Office Address					
City	MONTREAL	State	QUE	ZIP	H3X2Z2
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
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